

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	P.S.	66621	8/1
O.I.P.E. CLASSIFIER			8/1
FORMALITY REVIEW	C.Y.C.	JC 530	9-11-00
RESPONSE FORMALITY REVIEW	MB	B103	12-21-00
	A.M.	JC 580	08-09-01

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) ... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
1	✓	9/10/01	
2	✓	"	
3	✓	"	
4	✓	"	
5	✓	"	
6	✓	"	
7	✓	"	
8	✓	"	
9	✓	"	
10	✓	"	
11	✓	"	
12	✓	"	
13	✓	"	
14	✓	"	
15	✓	"	
16	✓	"	
17	✓	"	
18	✓	"	
19	✓	"	
20	✓	"	
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26	✓	"	
27	✓	"	
28	✓	"	
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31	✓	"	
32	✓	"	
33	✓	"	
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35	✓	"	
36	✓	"	
37	✓	"	
38	✓	"	
39	✓	"	
40	✓	"	
41	✓	"	
42	✓	"	
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44	✓	"	
45	✓	"	
46	✓	"	
47	✓	"	
48	✓	"	
49	✓	"	
50	✓	"	

Claim	Final	Original	Date
51	✓	9/10/01	
52	✓	"	
53	✓	"	
54	✓	"	
55	✓	"	
56	✓	"	
57	✓	"	
58	✓	"	
59	✓	"	
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96	✓	"	
97	✓	"	
98	✓	"	
99	✓	"	
100	✓	"	

Claim	Final	Original	Date
101	✓	9/10/01	
102	✓	"	
103	✓	"	
104	✓	"	
105	✓	"	
106	✓	"	
107	✓	"	
108	✓	"	
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141	✓	"	
142	✓	"	
143	✓	"	
144	✓	"	
145	✓	"	
146	✓	"	
147	✓	"	
148	✓	"	
149	✓	"	
150	✓	"	

If more than 150 claims or 10 actions
staple additional sheet here

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